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Name: Janet Le 8/22/03
 Signature: [Signature] Date: 8/22/03

Docket No.: FERN-P013

APPLICATION TRANSMITTAL LETTER

Commissioner of Patents
 P.O. Box 1450
 Alexandria 22313-1450

ATTN: MAIL STOP PATENT APPLICATION



Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): **Fernandez, et al.**

Entitled: **"INTEGRATED BIOSENSOR AND SIMULATION SYSTEM FOR DIAGNOSIS AND THERAPY"**

76 No. pages of specification, including title page, claims and abstract
12 No. sheets of informal, X formal drawings (Figs. 1a-b, 2, 3a-c, 4a-d, 5 & 6)

Also enclosed are:

- X Executed Combined Declaration and Power of Attorney for Patent Application
- X Petition to make special (2 pages)
- X Request and Certification Form PTO/SB/35 (11-00)
- X Application Data Sheet (3 sheets)
- X An Information Disclosure Statement (Form PTO/SB/08A and Form PTO/SB/08B)
- X A copy of References cited in Information Disclosure: 27 U.S. Patent, 1 PCT Patent, and 41 other references.

FEES DUE

 X Applicant Claims Small Entity Status (37 CFR 1.27)

The fees due for filing the application pursuant to 37 C.F.R. 1.16 and for recording the Assignment, if any, are determined as follow:

CLAIMS					
	No. of Claims		Extra Claims	Rate	Fees
Basic Application Fee (\$750 large entity; \$375 small entity)					\$ 375.00
Total Claims	10	Minus 20 =		X \$18 = X \$ 9 (small) =	.00
Total Independent Claims	2	Minus 3 =		X \$84 = X \$42 (small) =	.00
If Multiple Dependent Claims are presented, add \$280.00 or \$140.00(small)					
If Petition to make special is enclosed, add \$130.00					130.00
TOTAL APPLICATION FEE DUE					\$ 505.00

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PAYMENT OF FEES

The full fee due in connection with this communication is
and is provided as follows:

\$ 505.00

 The Commissioner is hereby authorized to charge the fees associated with this communication or credit any overpayment to **Deposit Account No: 500482**. A duplicate copy of this authorization is enclosed.

 X A Check No. 953 for the above-specified full fee is enclosed. However, in case Applicant inadvertently miscalculated any required fee, the Commissioner is hereby authorized to charge the necessary additional amount associated with this communication or credit any overpayment to **Deposit Account No: 500482**. A duplicate copy of this authorization is enclosed.

NO 18 MONTHS PUBLICATION

REQUEST AND CERTIFICATION UNDER 35. U.S.C. 122(b) (2) (B) (i)

 X I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen month after filing. **I hereby request that the attached application not to be publish under 35 U.S.C. 122(b).**

This application is filed pursuant to 37 C.F.R. 1.53 in the name of the above-identified Inventor(s).

Please direct all correspondence concerning the above-identified application to the following address:

FERNANDEZ & ASSOCIATES, LLP
PATENT ATTORNEYS
PO BOX D
MENLO PARK, CA 94026-6204
(650) 325-4999
(650) 325-1203: FAX
EMAIL: *iploft@iploft.com*



22877

PATENT TRADEMARK OFFICE

Respectfully submitted,

DENNIS S. FERNANDEZ, ESQ
Reg. No. 34,160

8/22/03

Date

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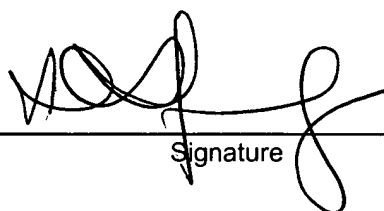
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REQUEST AND CERTIFICATION UNDER 35 U.S.C. 122(b)(2)(B)(i)	First Named Inventor	Fernandez, D.
	Title	Integrated Biosensor and Simulation System for Diagnosis and Therapy
	Atty Docket Number	FERN-P013

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U.S.C. 122(b).

8/22/03

Date


Signature

Dennis S. Fernandez, ESQ, Reg. No. 34,160
Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

Burden Hour Statement: This collection of information is required by 37 CFR 1.213(a). The information is used by the public to request that an application not be published under 35 U.S.C. 122(b) (and the PTO to process that request). Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 6 minutes to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: P.O. Box 1450, Alexandria, VA 22313-1450.

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The Commissioner for Patents
United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450
ATTN: Mail Stop Patent Application

Re: U.S. Utility Patent Application
Appl. No. (Not yet assigned); Filed 8/22/03
For: **Integrated Biosensor and Simulation System for Diagnosis and Therapy**
Inventor(s): **Fernandez, et al.**
Docket No.: **FERN-P013**

Sir:

The following documents are forwarded herewith for action by the U.S. Patent and Trademark Office:

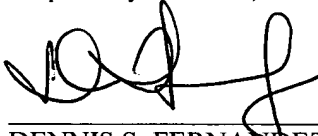
1. U.S. UTILITY APPLICATION
entitled: **Integrated Biosensor and Simulation System for Diagnosis and Therapy**
having named inventor(s):
Fernandez, et al.
 - a. a specification consisting:
 - (i) 73 pages prior to the claims, including title page;
 - (ii) 2 pages of claims;
 - (iii) 1 page abstract;
 - b. 12 sheets of **informal** drawings: (FIGs. 1a-b, 2, 3a-c, 4a-d, 5-6);
2. An **original, executed** Combined Declaration and Power of Attorney by named inventors;
3. Form PTO-1082 (in duplicate);
4. Request and Certification Form PTO/SB/35 (11-00);
5. Petition To Make Special (2 pages);
6. Check No. 953 For \$ 505.00 to cover:

Patent application filing fee:	\$ 375.00
Petition to make special fee:	\$ 130.00
Excess claims fee:	\$.00
7. Information Disclosure Statement and Forms PTO/SB/08A and PTO/SB/08B;
8. Application Data Sheet (3 sheets); and
9. A return post card

It is respectfully requested that the attached postcard be stamped with the filing date of the above documents and unofficial application number and returned to the addressee as soon as possible.

8/22/03
Date

Respectfully submitted,



DENNIS S. FERNANDEZ, ESQ
Reg. No. 34,160

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